




112503

16638 U.S. PTO

TRANSMITTAL OF UTILITY APPLICATION UNDER 37 C.F.R. §1.53		Attorney Docket No.	38349-0125		
		First named inventor	M. Barrett		
		Express mail label #	EV417727059US		
		Date of mailing	<u>November 25, 2003</u>		
Application Elements		Accompanying Application Papers			
1. <input checked="" type="checkbox"/> Fee Transmittal Form		6. <input type="checkbox"/> Copy of assignment documents from parent applications			
2. <input checked="" type="checkbox"/> Specification containing 40 pages (including Claims and Abstract). a. Title: DELIVERY METHODS AND DEVICES FOR IMPLANTABLE BRONCHIAL ISOLATION DEVICES b. Number of claims: 32		7. <input type="checkbox"/> Preliminary Amendment			
3. <input checked="" type="checkbox"/> 18 sheets of drawings		8. <input checked="" type="checkbox"/> Return Receipt Postcard			
4. <input type="checkbox"/> Declaration		9. <input type="checkbox"/> Small Entity Statement			
5. <input type="checkbox"/> Sequence Listing		10. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.			
<input type="checkbox"/> Paper copy (identical to computer copy)		 SIGNATURE OF ATTORNEY/AGENT HELLER EHRMAN WHITE & McAULIFFE LLP Fred C. Hernandez Registration Number: 41,832			
<input type="checkbox"/> Computer readable copy					
<input type="checkbox"/> Verified statement					
<input checked="" type="checkbox"/> Benefit of priority: This application claims priority of co-pending U.S. Provisional Patent Application Serial No. 60/429,902 filed November 27, 2002. Priority of the aforementioned filing date is hereby claimed. The subject matter of that patent application is incorporated into this application in its entirety.					
CORRESPONDENCE ADDRESS					
NAME	Stephanie L. Seidman Registration No. 33,779 Heller Ehrman White & McAuliffe LLP				
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FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	38349-0125
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FEE CALCULATION FOR CLAIMS AS AMENDED

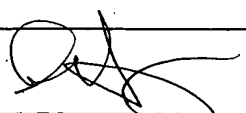
a)	Basic Fee		\$770/\$385	\$385.00
b)	Independent Claims	$\frac{5}{32} - 3 = \frac{2}{12}$	$\times \$86/\43	\$86.00
c)	Total Claims	$\frac{32}{12} - 20 = \frac{12}{12}$	$\times \$18/\9	\$108.00
d)	Fee for Multiple Dependent Claims	= \$280/\$140		\$0.00
TOTAL FILING FEE				\$579.00

☒ Applicant is a small entity.

☒ A check is enclosed in the amount of \$579.00 to cover the fee for filing the application.

☐ Charge \$_____ to Deposit Account No. 50-1213.

☒ The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

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Submitted by:			
Typed or printed name	Fred C. Hernandez		Reg. Number 41,832
Signature		Date 11/25/03	Deposit Account 50-1213